Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 1 of 67

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7
	Chapter 11 Chapter 12
	Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Shamika	
	First name	First name
Write the name that is on	N	
your government-issued picture identification (for example, your driver's	Middle name	Middle name
example, your driver's	Benson	
license or passport	Last name	Last name
Bring your picture		
identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you	Find	
have used in the last	First name	First name
8 years	Middle name	Middle name
Include your married or	Middle Harne	Middle name
maiden names.	Last name	Last name
	Last Harris	Edot Harro
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits		
of your Social	XXX - XX- 7476	XXX - XX-
Security number or federal Individual	OR	OR
Taxpayer	9 xx - xx-	9 xx - xx-
Identification number		
(ITIN)		

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 2 of 67

D	ebtor 1 Shamika First Name	N Benson Middle Name Last Name	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		4539 W Congress Pkwy Apt 3W Number Street	Number Street
		Chicago Illinois 60624 City State Zip Code	City State Zip Code
		Cook State Zip Code	
		County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 3 of 67

De	btor 1 Shamika	N	Benson	Case number (if ki	nown)
	First Name	Middle Name	Last Name		
Pai	rt 2: Tell the Court Abo	ut Your Bankruptcy Cas	e		
	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief des Bankruptcy (Form B2010)). Chapter 7 Chapter 11 Chapter 12 Chapter 13			C. § 342(b) for Individuals Filing for ropriate box.
	How you will pay the fee	more details about he cashier's check, or me may pay with a credit I need to pay the fee Individuals to Pay Yo I request that my fee judge may, but is not the official poverty lim	ow you may pay. Typically oney order If your attorn card or check with a pre- e in installments. If you cour Filing Fee in Installments be waived (You may required to, waive your fare that applies to your faron, you must fill out the A	y, if you are paying they is submitting your printed address. thoose this option, sints (Official Form 10 quest this option onlee, and may do so or mily size and you are	In the clerk's office in your local court for the fee yourself, you may pay with cash, our payment on your behalf, your attorney and attach the <i>Application for</i> 3A). By if you are filing for Chapter 7. By law, a soly if your income is less than 150% of unable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
	Have you filed for bankruptcy within the last 8 years?	Ves. District District District		When	Case number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Ves. Debtor District Debtor District		When	Relationship to you Case number, if known
	Do you rent your residence?	✓ No. Go to lin	ne 12.		lo you want to stay in your residence? nst You (Form 101A) and file it with

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 4 of 67

Debtor 1 Shamika Ν Benson Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. **|** For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 5 of 67

 Debtor 1
 Shamika
 N
 Benson
 Case number (if known)

 First Name
 Middle Name
 Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 6 of 67

Debtor 1 Shamika Benson Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Shamika Benson Signature of Debtor 1 Signature of Debtor 2 Executed on _ 1/23/2017 Executed on MM / DD / YYYY MM / DD / YYYY

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 7 of 67

Debtor 1 Shamika	N	Benson	Case number (if k	(nown)
First Name	Middle Name	Last Name	<u> </u>	
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12	2, or 13 of title 11, United	ave informed the debtor(s) about I States Code, and have explained the Iso certify that I have delivered to the
If you are not	debtor(s) the notice requ	uired by 11 U.S.C. §	342(b) and, in a case in w	hich § 707(b)(4)(D) applies, certify that I
represented by an	have no knowledge afte	r an inquiry that the i	information in the schedu	ules filed with the petition is incorrect.
attorney, you do not	4.0			
need to file this page.	/s/ Mike Miller		Date	1/23/2017
	Signature of Attorney	for Debtor	M	M / DD / YYYY
	Mike Miller			
	Printed name			
	Semrad Law Firm			
	Firm name			
	20 S. Clark Street			
	Street			
	28th Floor			
	Chicago		Illinois	60603
	City		State	Zip Code
	Contact phone	3122568728	Email address	mmiller@semradlaw.com
			Illinois	
	Bar number		State	

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 8 of 67

Fill in this information to identify your case:							
Debtor 1	Shamika	N	Benson				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois				
			(State)				
Case number (If known)							

	Check if	this	is	an
_	amende	d filii	ng	

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	\$0.00
1a. Copy line 55, Total real estate, from Schedule A/B	Ψ0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$11,376.00
1c. Copy line 63, Total of all property on Schedule A/B	\$11,376.00
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	\$12,954.00
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	Ψ12,004.00
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$0.00
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$7,072.00
Your total liabilities	\$20,026.00
art 3: Summarize Your Income and Expenses	
difficient out in come and Expenses	
·	
•	\$2,442.69
. Schedule I: Your Income (Official Form 106I)	\$2,442.69

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 9 of 67

Benson Debtor 1 Shamika Ν Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,539.60 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$0.00

9g. Total. Add lines 9a through 9f.

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 10 of 67

					r ago 20 or	_		
Fill in this	information	to identify your c	ase:					
Debtor 1	Shan		N		Benson			
Debtor 2	First	Name	Middle N	lame	Last Name			
(Spouse, if fi	ling) First	Name	Middle N	lame	Last Name			
United Sta	ates Bankrup	otcy Court for the:	Northern		District of Illinois (State)			
Case num (If known)	nber				(3.3.3)			_
Officia	al Form	106A/B						Check if this is an amended filing
Sche	dule A	/B: Prope	rty					12/1
category v responsible write your Part 1:	where you to le for supply name and Describe	hink it fits best. I ying correct infor case number (if k Each Residenc	Be as complete a mation. If more s nown). Answer e ee, Building, Lai	nd acci pace is very qu nd, or	sset only once. If an asset fits in murate as possible. If two married possible as possible as separate sheet estion. Other Real Estate You Own or esidence, building, land, or similar	eople are to this fo	e filing together, both a orm. On the top of any a an Interest In	re equally
1. Do you	No. Go to		juitable interest i	in any r	esidence, building, land, or similal	r properi	y:	
	Yes. Where	is the property?						
1.1		ess, if available, or	other description	Si Di Co	is the property? Check all that apply ngle-family home uplex or multi-unit building ondominium or cooperative	y .	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> <i>iims Secured by Property.</i> Current value of the portion you own?
					anufactured or mobile home			
	Number Street				and vestment property		Describe the nature o	f your ownership
	City	State	Zip Code	H	meshare ther		interest (such as fee s the entireties, or a life	
				one. De	nas an interest in the property? Chebtor 1 only ebtor 2 only ebtor 1 and Debtor 2 only least one of the debtors and another		Check if this is co (see instructions)	mmunity property
				ш	information you wish to add abou		m. such as local	
					rty identification number:			
If you		e more than one, li ess, if available, or		Si Di Co	is the property? Check all that apply ngle-family home uplex or multi-unit building ondominium or cooperative anufactured or mobile home	y .	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own?
	Number	Street			and		Describe the nature of	f vour ownership
	City	State	Zip Code	H	vestment property meshare ther		Describe the nature of interest (such as fee sthe entireties, or a life	simple, tenancy by
	Oily	State	Σiρ Code	Who I one. Do D	nas an interest in the property? Chebtor 1 only bettor 2 only bettor 1 and Debtor 2 only least one of the debtors and another information you wish to add abourty identification number:	r	(see instructions)	mmunity property

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 11 of 67

Debtor 1		N	Benson	_ Case numbe	r (if known)	
	First Name	Middle Name	Last Name			
1.3Stree	et address, if available, or ot	[What is the property? Check all that ap Single-family home	oply.	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.
		[[Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home		Current value of the entire property?	Current value of the portion you own?
Num	nber Street State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee sthe entireties, or a life	imple, tenancy by
		[[[Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and anot	her	Check if this is co (see instructions)	mmunity property
			Other information you wish to add ab property identification number:	out this item,	such as local	
you ha	the dollar value of the pove attached for Part 1. Wi	ite that number h	all of your entries from Part 1, includ ere. ▶	ing any entrie	s for pages	
you own th 3. Cars, va	nat someone else drives. If y ns, trucks, tractors, sport ut	you lease a vehicle,	t in any vehicles, whether they are realso report it on Schedule G: Executory cycles	-	-	
✓ Yes	5					
3.1	Make Model: Year:	Dodge Avenger 2012	Who has an interest in the prope one. Debtor 1 only	rty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.
	Approximate mileage: Other information: Surrender	105000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	another	Current value of the entire property? \$4825.00	Current value of the portion you own? \$4825.00
			Check if this is community printing instructions)	roperty (see		
3.2	Make Model: Year:		Who has an interest in the prope one. Debtor 1 only	erty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> aims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and	another	Current value of the entire property?	Current value of the portion you own?
			Check if this is community prinstructions)	roperty (see		

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 12 of 67

Name del: roximate mileage: er information:	Middle Name	Last Name Who has an interest in the property? Check one.	Do not deduct secured		
del: :: roximate mileage:			Do not deduct secured		
roximate mileage:			and the second s	•	
roximate mileage:				red claims on Schedule	
		Debtor 1 only	Creditors virio mave Cia	aims Secured by Propert	
er information:		Debtor 2 only	Current value of the	Current value of the	
		Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
e		Who has an interest in the property? Check		claims or exemptions. P	
del:		one.	•	red claims on Schedule	
	ear:		Debtor 1 only	Creditors Who Have Cla	aims Secured by Propert
roximate mileage:		Debtor 2 only	Current value of the	Current value of the	
er information:		Debtor 1 and Debtor 2 only	entire property?	portion you own?	
		At least one of the debtors and another			
		Check if this is community property (see			
		instructions)			
e del:		Who has an interest in the property? Check one.	Do not deduct secured the amount of any secu		
-		Debtor 1 only	Creditors Who Have Cla	aims Secured by Propert	
roximate mileage:		Debtor 2 only	Current value of the	Current value of the	
		Debtor 1 and Debtor 2 only	entire property?	portion you own?	
er information:					
er information:		At least one of the debtors and another			
er information:		<u></u>			
er information:		At least one of the debtors and another Check if this is community property (see instructions)			
er information:		Check if this is community property (see		claims or exemptions. F	
		Check if this is community property (see instructions)	Do not deduct secured the amount of any secu	claims or exemptions. Fured claims on Schedule	
ie del: :-		Check if this is community property (see instructions) Who has an interest in the property? Check	Do not deduct secured the amount of any secu	claims or exemptions. Fured claims on Schedule	
e del:		Check if this is community property (see instructions) Who has an interest in the property? Check one.	Do not deduct secured the amount of any secu	claims or exemptions. Fured claims on Schedule	
ie del: :-		Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only	Do not deduct secured the amount of any secu- Creditors Who Have Cla	claims or exemptions. F red claims on <i>Schedule</i> aims Secured by Propert	
e del: :- roximate mileage:		Check if this is community property (see instructions) Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only	Do not deduct secured the amount of any secu- Creditors Who Have Cla	claims or exemptions. Fured claims on Schedule sims Secured by Property	
	del: :roximate mileage: er information: off, aircraft, motor hom : Boats, trailers, motors, ee del:	del: roximate mileage: er information: off, aircraft, motor homes, ATVs and other Boats, trailers, motors, personal watercraft, delei:	del: croximate mileage: pebtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) If, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and act instructions. Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle access Who has an interest in the property? Check one. Debtor 1 only	del: Debtor 1 only Current value of the entire property?	

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 13 of 67

Debtor 1 Shamika Benson Case number (if known) Middle Name First Name Last Name Part 3: **Describe Your Personal and Household Items** Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Yes. Describe... Used Furniture \$300.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Yes. Describe... (3)TV (1)Cellphone (1)Tablet \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections, other collections, memorabilia, collectibles Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothes** \$600.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... Used Jewelry \$100.00 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1500.00 for Part 3. Write that number here

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Page 14 of 67 Document

Benson

Debtor 1 Shamika Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Money Network-Pre Paid Debit car with Bank of America 17.1. Checking account: \$1.00 <u>\$</u>1.00 17.2. Checking account: Pre Paid-Green Dot 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 15 of 67

Debt	tor 1 Shamika	N	Benson	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer	checks, promissory no	ites, and money orders.	
	them	Issuer name:			
21.	Retirement or pension				
			, thrift savings accounts	s, or other pension or profit-sharing plans	
	Yes. List each	Type of account:	Institution name:		
	account separately.	401(k) or similar plan:			
		Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
00	0	Additional account:			·
22.		prepayments d deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit:	Security Deposit with	Landlord	\$1400.00
		Prepaid rent:			
		Telephone:			
		Water:			
		Rented furniture:			
		Other:			
23.		or a periodic payment of money to	you, either for life or fo	r a number of years)	
	✓ No Yes	Issuer name and description:			

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 16 of 67

Debt	or 1 Shamika N	Benson	Case number (if known)	
24.			under a qualified state tuition program.	
	✓ No	ription. Separately file the records of any in	terests.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future interests in exercisable for your benefit	property (other than anything listed in	line 1), and rights or powers	
	✓ No Yes. Describe			
26.		e secrets, and other intellectual prope ites, proceeds from royalties and licensing		
	✓ No Yes. Describe			
27.	Licenses, franchises, and other gener Examples: Building permits, exclusive lice	al intangibles enses, cooperative association holdings, lic	quor licenses, professional licenses	
	✓ No Yes. Describe			
Mor	ney or property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you			
	No Yes. Give specific information	2016 Tax Returns (EIC)	Federal:	\$3649.00
	about them, including whether you already filed the returns		State:	\$0.00
	and the tax years		Local:	\$0.00
29.	Family support Examples: Past due or lump sum alimony	, spousal support, child support, maintena	ance, divorce settlement, property settlemen	t
	✓ No Yes. Give specific information		Alimony:	\$0.00
	res. Give specific information		Maintenance:	\$0.00
			Support:	\$0.00
			Divorce settlement:	\$0.00
			Property settlement:	\$0.00
30.	Other amounts someone owes you Examples: Unpaid wages, disability insura Social Security benefits; unpaid	nce payments, disability benefits, sick pay, I loans you made to someone else	vacation pay, workers' compensation,	
	✓ No			
	Yes. Describe			

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 17 of 67

Deb	or 1 Shamika	N Middle Norse	Benson	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance pol Examples: Health, disability,		vings account (HSA); credit, ho	omeowner's, or renter's insurance	
	No Nome the incurrence	Com	pany name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insurance of each policy and list it		nsurance through employer		\$0.00
32.	Any interest in property the lift you are the beneficiary of property because someone	a living trust, expect procee		, or are currently entitled to receive	
	✓ No				
	Yes. Describe				
33.	Examples: Accidents, emplo		ave filed a lawsuit or made a claims, or rights to sue	a demand for payment	
	Yes. Describe				
34.	Other contingent and unli	iquidated claims of every	nature, including counterc	laims of the debtor and rights	
	✓ No				
	Yes. Describe				
35.	Any financial assets you d	lid not already list			
	✓ No				
	Yes. Describe				
				,	
36.		-	t 4, including any entries for		\$5051.00
Dout	Dogoribo Any Rusin	naa Palatad Proport	· Vou Own or Hove on In	terest In. List any real estate in Part	4
Part			in any business-related pro		1.
01.	No. Co to Bort C	yan or oquitable interest	m any business related pro		urrent value of the
	Yes. Go to line 38.			D	ortion you own? o not deduct secured claims r exemptions
38.	Accounts receivable or co	ommissions you already e	earned	Ü	i oxempuons
	✓ No				
	Yes. Describe				
39.	Office equipment, furnishi				
	□ Na	computers, software, mod	ems, printers, copiers, fax mad	chines, rugs, telephones, desks, chairs, electi	ronic devices
	✓ No Yes. Describe				

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 18 of 67

Debt	tor 1 Shamika	N	Benson	Case number (if known)	
	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, equip	ment, supplies you u	se in business, and tools of you	ır trade	
	✓ No				
	Yes. Describe				1
41.	Inventory				
	.∡ No				
	Yes. Describe				1
	L 163. Bescribe				
					1
42.	Interests in partnerships of	or joint ventures			
	✓ No				
		١	Name of entity:	% of ownership:	
	Yes. Give specific information about				
	them	-		· · · · · · · · · · · · · · · · · · ·	
		<u>-</u>			<u> </u>
42.6	Customer lists, mailing lists	_ 			_
43.	oustomer lists, mailing lists	s, or other compliant	onis -		
	✓ No				
	Yes. Do your lists include	le personally identifiabl	e information (as defined in 11 U	.S.C. § 101(41A))?	
	— — No				
	No	Г			
	Yes. Describe				
11	Any business-related prop	erty you did not alre-	adv liet		
77.	—	erty you did not an e	ady iist		
	✓ No	_			<u> </u>
	Yes. Give specific				
	information	-			
		<u>-</u>			
		-			
		-			
		-			
45 A	dd tha dallar valua of all of	vour entries from Da	rt 5, including any entries for	agge you have attached	
>					
Part				You Own or Have an Interest In.	
	If you own or have an inter	est in farmland, list it in	Part 1.		
46.	Do you own or have any le	gal or equitable inte	rest in any farm- or commerci	al fishing-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47.				portion you own?
	Tes. do to line 47.				Do not deduct secured claims or exemptions
47	Farm animals				C. CAUTIPHOTIC
٦,.	Examples: Livestock, poultry	y, farm-raised fish			
	□ Na				
	✓ No				1
	Yes. Describe				
					1

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 19 of 67

Debto	or 1 Shamika First Name	N Middle Name	Benson Last Name	Case number (if known)	
48.	Crops-either growing	or harvested			
	No Yes. Describe				
49.	Farm and fishing equi	ipment, implements, machinery, fixtu	ires, and tools of trade		
	✓ No				
	Yes. Describe				
50.	Farm and fishing supp	blies, chemicals, and feed			
	✓ No				
	Yes. Describe				
51.	Any farm- and comme	ercial fishing-related property you die	d not already list		
	✓ No				
	Yes. Describe				
				Γ	
		all of your entries from Part 6, includi	ng any entries for pages y	you have attached	
>	re or write that hambe				
Part 7	Describe All Pro	operty You Own or Have an Inte	rest in That You Did No	ot List Above	
		pperty of any kind you did not already	list?		
		ts, country club membership			
	✓ No Yes. Give specific				
	information				
54 Ad	d the dollar value of a	all of your entries from Part 7. Write t	hat number here	1	•
J4. Au	du the donar value of a	in or your entires noin rait 7. write t	nat number here		
	-	CELL D. L. CHILLE.			
Part 8	List the Totals of	of Each Part of this Form			
55. P	art 1: Total real estat	e, line 2			
56. p	art 2 total vehicles, li	ne 5	\$4825.00		
57. P a	art 3: Total personal a	nd household items, line 15	\$1500.00		
58. P a	art 4: Total financial a	ssets, line 36	\$5051.00		
59. P	art 5: Total business-	related property, line 45			
60. P	art 6: Total farm- and	fishing-related property, line 52			
61. P	art 7: Total other prop	perty not listed, line 54			
62. T	otal personal property	y. Add lines 56 through 61	\$11376.00	Copy personal property total	+ \$11376.00
					\$11376.00
63. Tc	otal of all property on	Schedule A/B. Add line 55 + line 62			

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 20 of 67

Fill in this infor	mation to identify your ca	ase:		
Debtor 1	Shamika	N	Benson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)	
Case number (If known)			(Otato)	

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pai	t 1: Identify the Property You Clain	n as Exempt		
1.	Which set of exemptions are you claiming	ng? Check one only, ev	ven if your spouse is filing with you.	
	You are claiming state and federal r	nonbankruptcy exemp	otions. 11 U.S.C. § 522(b)(3)	
	You are claiming federal exemption	s. 11 U.S.C. § 522(b)(2)	
2.	For any property you list on Schedule A	/B that you claim as e	exempt, fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this	Current value of the portion you	Amount of the exemption you claim	Specific laws that allow exemption
	property	own	Check only one box for each exemption.	
		Copy the value from Schedule A/B		
	Brief			735 ILCS 5/12-1001(b)
	description:	\$300.00	\$300.00	
	Used Furniture Line from		100% of fair market value, up to any	-
	Schedule A/B: 06		applicable statutory limit	
	Brief			735 ILCS 5/12-1001(a)
	description:	\$600.00	\$600.00	
	Used Clothes Line from		100% of fair market value, up to any	-
	Schedule A/B: 11		applicable statutory limit	
3.	✓ No	ery 3 years after that for	375? cases filed on or after the date of adjustment.) within 1,215 days before you filed this case?	

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 21 of 67

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
	Copy the value from Schedule A/B		
Brief description: (3)TV (1)Cellphone (1)Tablet Line from Schedule A/B: 07	\$500.00	\$500.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Used Jewelry Line from Schedule A/B: 12	\$100.00	\$100.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Checking account, Money Network-Pre Paid Debit car with Bank of America	\$1.00	\$1.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17			
Brief description: Checking account, Pre Paid-Green Dot Line from Schedule A/B: 17	\$1.00	\$1.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Life insurance through employer Line from Schedule A/B: 31	\$0.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(f)
Brief description: Security deposit on rental unit, Security Deposit with Landlord Line from Schedule A/B: 22	\$1,400.00	\$1,400.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Federal, 2016 Tax Returns (EIC) Line from Schedule A/B: 28	\$3,649.00	\$3,649.00; \$0.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-803, 740 ILCS 170, 735 ILCS 5/12-1001(b)

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main

			Do	ocument Page 22 of	67		
Fill in	this inforr	mation to identify your ca	se:				
Debto	or 1	Shamika First Name	N Middle Name	Benson Last Name			
Debto (Spous	or 2 e, if filing)	First Name	Middle Name	Last Name			
United	d States B	ankruptcy Court for the:	Northern	District of Illinois (State)			
Case (If know	number ⁽ⁿ⁾						
Offi	icial I	Form 106D			」		Check if this is a amended filing
Sch	nedu	le D: Credito	ors Who Ha	ve Claims Secur	ed by Prop	ertv	12/1
Be as more s	complete space is r and case	e and accurate as possib needed, copy the Additio number (if known).	le. If two married peop onal Page, fill it out, nu	le are filing together, both are equ mber the entries, and attach it to	ally responsible for s	upplying correct info	
1. [-	reditors have claims se		-			
Ĺ	_			with your other schedules. You have	ve nothing else to rep	ort on this form.	
	Yes. F	Fill in all of the information	n below.				
Part '	List A	All Secured Claims					
2.	separatel	y for each claim. If more th	nan one creditor has a pa	cured claim, list the creditor rticular claim, list the other creditors order according to the creditor's	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.1		ACCEPTANCE	Describe the propert	y that secures the claim:	\$12,954.00	\$4,825.00	\$8,129.00
	Creditor's PO BOX		Dodge Avenger Value]		
	Numbe			e, the claim is: Check all that apply.			
			Contingent				
	Southfie		Unliquidated				
	City Who ow	State ZIP Code es the debt? Check one.	Disputed				
		tor 1 only	Nature of lien. Check	all that apply.			
		tor 2 only tor 1 and Debtor 2 only	An agreement you car loan)	made (such as mortgage or secured			
		ast one of the debtors	Statutory lien (suc	n as tax lien, mechanic's lien)			
		another	Judgment lien from	n a lawsuit			
	to a	ck if this claim relates community debt	Other (including a	, <u></u>			
	Date del	bt was <u>2/1/2016</u>	Last 4 digits of accor	ınt number7318			

Add the dollar value of your entries in Column A on this page. Write that number

incurred

here:

\$12,954.00

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 23 of 67

Fill in th	is information to identify your	case:			
Debtor	1 Shamika	N	Benson		
	First Name	Middle Name	Last Name		
Debtor					
(Spouse,	ffiling) First Name	Middle Name	Last Name		
United	States Bankruptcy Court for the:	Northern	District of Illinois		
Case nu	ımhor		(State)		
(If known)					
Offic	ial Form 106E/F				Check if this is an amended filing
					_
Sch	edule E/F: Cre	editors Who	Have Unsec	ured Claims	12/1
other pa Form 10 claims t the entr known).	rty to any executory contract 6A/B) and on <i>Schedule G: Ex</i> hat are listed in <i>Schedule D:</i> ies in the boxes on the left. A	ts or unexpired leases that ecutory Contracts and Ur Creditors Who Hold Clain ttach the Continuation P	at could result in a claim. Al nexpired Leases (Official For ns Secured by Property. If m	so list executory contracts rm 106G). Do not include an ore space is needed, copy t	n NONPRIORITY claims. List the on Schedule A/B: Property (Official by creditors with partially secured he Part you need, fill it out, number rite your name and case number (if
	List All of Your PRIORIT				
_	any creditors have priority u	nsecured claims against	you?		
<u> </u>	No. Go to Part 2.				
	Yes.				
list As	ed, identify what type of claim it	t is. If a claim has both prior	rity and nonpriority amounts, I ording to the creditor's name. I	ist that claim here and show b f you have more than two pric	arately for each claim. For each claim oth priority and nonpriority amounts. ority unsecured claims, fill out the

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

Total

claim

Priority

amount

Nonpriority

amount

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 24 of 67

Debtor 1 Shamika Benson Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. **✓** Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Americas Financial Chocie \$810.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 6 N Austin Blvd, Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60302 Oak Park Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ payday loan Is the claim subject to offset? Yes 4.2 \$514.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1/1/2015 501 Greene Street # 302 Number Street As of the date you file, the claim is: Check all that apply. Contingent Georgia 30901 Augusta Unliquidated City Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **✓ ORIGINAL CREDITOR: 10 ✓** No COMMONWEALTH EDISON Other. Specify COMPANY City of Chicago - Parking and red Light Tickets \$1,400.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt DL #: B525-7947-6664 PL#: Other. Specify Z893246 Is the claim subject to offset? **✓** No Yes

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 25 of 67

Debtor 1 Shamika N Benson Case number (if known)
First Name Middle Name Last Name

	After listing any entries on this page, number them beginning	with 4.5. followed by 4.6. and so forth.	Total claim
4 4		with 4.5, followed by 4.5, and so forth.	
1.4	CREDITORS DISCOUNT & A Nonpriority Creditor's Name	Last 4 digits of account number 9169	\$349.00
	415 E MAIN ST	When was the debt incurred? 2/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	STREATOR Illinois 61364	— Unliquidated	
	City State Zip Code		
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	001 Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR: MEDICAL Other. Specify PAYMENT DATA	
	Yes		
5	I C SYSTEM INC	Last 4 digits of account number 4801	\$452.00
	Nonpriority Creditor's Name PO BOX 64378	When was the debt incurred? 9/1/2016	
	Number Street	<u>—</u>	
		As of the date you file, the claim is: Check all that apply.	
	SAINT PAUL Minnesota 55164	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	001 Collection; Collecting for	
	No	ORIGINAL CREDITOR:	
	Yes	Other. Specify COMCAST	
_			******
6	Loretto Hospital Nonpriority Creditor's Name	Last 4 digits of account number	\$2,000.00
	645 S. Central Avenue	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
		Unliquidated	
	Chicago Illinois 60644	_ 	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a community debt	debts Other. Specify Medical Bill	
	Is the claim subject to offset?	Other. Specify	
	No		

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 26 of 67

Debtor 1 Shamika N Benson Case number (if known)
First Name Middle Name Last Name

Part 2	Your NONPRIORITY Unsecured Claims - Continuation	Page	
	After listing any entries on this page, number them beginning with	h 4.5, followed by 4.6, and so forth.	Total claim
4.7	Peoples Gas	Last 4 digits of account number	\$863.00
	Nonpriority Creditor's Name 200 E. Randolph	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Chicago Illinois 60601	Unliquidated	
	Chicago Illinois 60601 City State Zip Code	Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	브	debts	
	Check if this claim relates to a community debt	Other. Specify gas bill	
	Is the claim subject to offset?		
	Yes		
4.8	Speedy Cash		\$410.00
4.0	Nonpriority Creditor's Name	Last 4 digits of account number	\$410.00
	4648 S Cicero Ave Number Street	When was the debt incurred?n/a	
	Tidingo.	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Chicago Illinois 60638	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Other. Specify payday loan	
	Is the claim subject to offset?		
	✓ No		
	Yes		
4.9	STELLAR RECOVERY INC	Last 4 digits of account number 5982	\$274.00
	Nonpriority Creditor's Name 1327 HWY 2 W	When was the debt incurred? 1/1/2016	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	KALISPELL Montana 59901	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	001 Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR: DISH Other. Specify NETWORK	
	Yes		

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 27 of 67

Debtor 1 Shamika Benson Case number (if known) Middle Name First Name Last Name Part 3: List Others to Be Notified About a Debt That You Already Listed Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Comed On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check Po Box 805379 Line 4.2 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Chicago Illinois 60680 Last 4 digits of account number 2045 City State Zip Code Comcast On which entry in Part 1 or Part 2 did you list the original creditor? of (Check Part 1: Creditors with Priority Unsecured Claims p.o. box 196 one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims New Jersey 07101 Newark 4801 Last 4 digits of account number City State Zip Code Dish Network On which entry in Part 1 or Part 2 did you list the original creditor? Name of (Check 9601 S Meridian Blvd Line 4.9 Part 1: Creditors with Priority Unsecured Claims one): Number Street Part 2: Creditors with Nonpriority Unsecured Claims Englewood Colorado 80112 Last 4 digits of account number 5982

On which entry in Part 1 or Part 2 did you list the original creditor?

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured

of (Check

one):

Last 4 digits of account number

Zip Code

60604

Zip Code

State

Illinois

State

City

Number

CHICAGO

City

HARRIS & HARRIS LTD

111 W JACKSON BLVD S-400

Street

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 28 of 67

Debtor 1 Shamika N Benson Case number (if known)
First Name Middle Name Last Name

THISTING	ne widde Name Last Name				
Part 4: Add t	ne Amounts for Each Type of Unsecured Claim				
6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.					
			Total claims		
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00		
	6b. Taxes and certain other debts you owe the government	6b.	\$0.00		
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$0.00		
	6d. Other. Add all other priority unsecured claims. Write that	6d.	\$0.00		
	amount here.		\$0.00		
	6e. Total. Add lines 6a through 6d.	6e.			
			Total claims		
Total claims from Part 2	6f. Student loans	6f.	\$0.00		
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00		
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00		
	6i. Other. Add all other nonpriority unsecured claims. Write	6i.	\$7,072.00		
	that amount here.	e:	\$7,072.00		

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 29 of 67

Fill in this information to identify your case:					
Debtor 1	Shamika	N	Benson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number (If known)			(,		

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 30 of 67

Ellis des sec	and the state of t				
FIII IN THIS INTO	ormation to identify your c	ase:			
Debtor 1	Shamika	N	Benson		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(Otate)		
					Check if this is a
					amended filing
Official	Form 106H				
Schedu	le H: Your Cod	lehtors			12/1
Scriedu	ie n. rour Coc	ienioi 2			12/1:
1. Do you h	5			ŕ	
	he last 8 years, have you buisiana, Nevada, New Mex				v property states and territories include Arizona, California,
✓ No.	. Go to line 3.				
Yes	s. Did your spouse, forme	r spouse, or legal equiva	alent live with you at the	e time?	
✓	No				
	Yes. In which communit	y state or territory did yo	u live?	Fill in the	name and current address of that person.
	Name of your spouse, f	ormer spouse, or legal equ	ivalent		
	Number Street				
	City	State	Zip C	Code	
3. In Colum	nn 1, list all of your codeb	otors. Do not include you	r spouse as a codebto	r if your spous	se is filing with you. List the person shown in line 2

again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 31 of 67

Fill in this information to ider	atify your case:				
Debtor 1 Shamika First Name	N Middle Name	Benso Last N		_	
Debtor 2	Wildale Harrio	Lastin	ario		eck if this is:
(Spouse, if filing) First Name	Middle Name	Last N	ame		An amended filing
United States Bankruptcy Courthe:	t for <u>Northern</u>	District of III	inois State)		A supplement showing post-petition chapter expenses as of the following date:
Case number		(0			
(If known)					MM / DD / YYYY
Official Form 106	<u> </u>				
Schedule I: Your	Income				12/
	eded, attach a separate she every question.				not include information about your ional pages, write your name and case
Fill in your employment information.		Debtor 1			Debtor 2
	Employment status	Emplo	oyed		Employed
If you have more than one jol attach a separate page with	0,	V Not Er	nployed		Not Employed
information about additional employers.	Occupation	_			_
Include part time, seasonal, o	•				
self-employed work.	p.o,o. o				
Occupation may include stud or homemaker, if it applies.	Employer's address ent	Number St	reet		Number Street
		_			
		City	State	Zip Code	City State Zip Code
	How long employed there?				
Part 2: Give Details Abo	ut Monthly Income				
				. "	
spouse unless you are separat	ed.	•		•	write \$0 in the space. Include your non-filing
If you or your non-filing spouse more space, attach a separate		, combine the			or that person on the lines below. If you need For Debtor 2 or
			For De	Dtor 1	non-filing spouse
, , ,	, salary, and commissions (before nthly, calculate what the monthly		2.	\$2,317.66	
3. Estimate and list monthly	overtime pay.		3	+ \$0.00	
4. Calculate gross income.	Add line 2 + line 3.		4.	\$2,317.66	

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 32 of 67

Debtor	r 1Shamika			Case number (if		
	First Name	Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse	
Copy	y line 4 here		→ 4.	\$2,317.66		
5. List	all payroll ded					
5a. '	Tax, Medicare,	and Social Security deductions	5a.	\$288.08		
5b.	Mandatory cor	ntributions for retirement plans	5b.	\$0.00		
5c. '	Voluntary cont	ributions for retirement plans	5c.	\$0.00		
5d.	Required repay	yments of retirement fund loans	5d.	\$0.00		
5e.	Insurance		5e.	\$32.41		
5f. [Domestic supp	ort obligations	5f.	\$0.00	·	
5g.	Union dues		5g.	\$44.48		
5h.	Other deduction	ons. Specify:	_ 5h. +	\$0.00 +		
6. Add +5h.	the payroll ded	ductions. Add lines 5a + 5b + 5c + 5d + 5e +5	f + 5g 6.	\$364.98		
7. Calc	ulate total mo	nthly take-home pay. Subtract line 6 from line	94. 7.	\$1,952.69		
8. List	all other incon	ne regularly received:				
1	business, profe	,				
		ent for each property and business showing ordinary and necessary business expenses, and y net income.	8a.	\$0.00		
8b.	Interest and di	vidends	8b.	\$0.00		
	Family support dependent reg	payments that you, a non-filing spouse, or ularly receive	а			
		, spousal support, child support, maintenance, int, and property settlement.	8c.	\$0.00		
8d.	Unemployment	t compensation	8d.	\$0.00		
8e. :	Social Security	1	8e.	\$0.00		
 	nclude cash ass cash assistance under the Supple nousing subsidie Specify:	ent assistance that you regularly receive sistance and the value (if known) of any non- that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es e Programs Income	8f.	\$490.00		
8g.	Pension or reti	irement income	8g.	\$0.00		
8h.	Other monthly	income. Specify:	8h. +	\$0.00 +		
9. Add	all other incon	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g -	+ 8h. 9.	\$490.00		
		r income. Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp	10. couse	\$2,442.69	=	\$2,442.69
Inclu frien	ude contribution ds or relatives.	gular contributions to the expenses that you is from an unmarried partner, members of your amounts already included in lines 2-10 or amounts	household, your	dependents, your roomi		
Spe	cify:				11.	+ \$0.00
		n the last column of line 10 to the amount in the Summary of Schedules and Statistical Su				\$2,442.69
						Combined monthly income
13. Do	you expect an	increase or decrease within the year after	you file this form	?		
	Yes. Explain:					

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main

	0430 17	01002 0001	Doci	ument Page	e 33 of 67	717 14.02.12	Descriviant	
Fill in this inforr	mation to identif	y your case:						
Debtor 1	Shamika First Name	N Middl	e Name	Benson Last Name				
Debtor 2 (Spouse, if filing)	First Name		e Name	Last Name		Check if this is: An amended filin	g	
United States B	ankruptcy Court	for the: Northern		District of Illinois (State)			lowing post-petition chapt he following date:	er 13
Case number (If known)				. ,		MM / DD / YYYY	<u> </u>	
Official I	Form 10	<u>6J</u>						
Schedule	J: Your	Expenses						12/15
Part 1: Desc 1. Is this a join	ver every quest cribe Your Ho nt case? to line 2 es Debtor 2 live	ion.	oold?				ame and case number	
2. Do you have		No No	1000 Z, ZXpc	noco for ocparate frode	icrioid of Bebler			
Do not list De Debtor 2.	ebtor 1 and	Yes. Fill out this ir each dependent	formation for	Dependent's relati Debtor 1 or Debtor	•	Dependent's age	Does dependent live with you?	
3. Do your exp expenses of than yourself and dependents	people other	✓ No ☐ Yes						
Part 2: Estin	nate Your On	going Monthly Expe	enses					
expenses as of applicable dat	f a date after th	your bankruptcy filing e bankruptcy is filed.	If this is a sup	oplemental Schedule	J, check the bo	•	•	

such assistance and have included it on Schedule I: Your Income (Official Form B 1061.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot. 4.	4.	\$950.00
If not included in line 4:		
4a. Real estate taxes	4a	\$0.00
4b. Property, homeowner's, or renter's insurance	4b.	\$0.00
4c. Home maintenance, repair, and upkeep expenses	4c.	\$0.00
4d. Homeowner's association or condominium dues	4d.	\$0.00

Your expenses

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 34 of 67

Debtor 1 Shamika N Benson Case number (if known)
First Name Middle Name Last Name

5. Additional mortgage payments for your residence, such as home equily loans 5. \$0.00 6. Utilities: 5. \$0.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Tallephone, call phone, Internet, satellite, and cable services 6c. \$30.00 6c. Tallephone, call phone, Internet, satellite, and cable services 6c. \$30.00 6d. Other, Speatity: 6d \$0.00 7. Food and housekeeping supplies 7. \$490.00 8. Childria, Sundry, and dry cleaning 9. \$100.00 10. Personal care products and services 10. \$100.00 11. Medical and dental expenses 11. \$0.00 12. Transportation, Include gaz gam, maintranace, bus or frain fare. 12. \$315.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Internamen. 15. \$0.00 15. Health insurance 15a \$0.00 15. While insurance deducted from your pay or included in lines 4 or 20. \$0.00 15. While insurance. 15a \$0.00	First Name	Middle Name Last Name		
				Your expenses
6a. Electricity, heat, natural gas 6a. \$215.00 6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$300.00 6d. Other. Specify: 6d. \$0.00 7. Food and housekeeping supplies 7. \$490.00 8. Childcare and children's education costs 8. \$0.00 9. Ciothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services 11. \$0.00 11. Medical and dental expenses 11. \$0.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$315.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Install insurance 15. \$0.00 15b. Health insurance 15. \$0.00 15c. Vahicle Insurance 15c. \$0.00 15c. Vahicle Insurance. 15c. \$0.00 15c. Vahicle Insurance.	5. Additional mortgage payments f	or your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$300.00 6d. Other, Specify: 7. \$490.00 7. Food and housekceping supplies 7. \$490.00 8. Childcare and children's education costs 8. \$0.00 9. Citothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services 11. \$0.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$315.00 10. not include care payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15c. Vehicle insurance 15b \$0.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance specify: 15c \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in l	6. Utilities:			
6c. Telephone, cell phone, Internet, satellite, and cable services 6 d. \$300.00 6 d. Other. Specify:	6a. Electricity, heat, natural gas		6a.	\$215.00
6d. Other. Specify: 6d \$0.00 7. Food and housekeeping supplies 7. \$490.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services 10. \$100.00 11. Medical and dental expenses 11. \$0.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$315.00 Do not include care payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 15. Insurance. 15. \$0.00 15a. Lile insurance deducted from your pay or included in lines 4 or 20. 15a. Lile insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance. 15c \$50.00 15c. Vehicle insurance. 15c \$0.00 15c. Vehicle insurance. 15c \$0.00 15c. Vehicle insurance. 15c \$0.00 15c. Vehicle insurance. \$0.00 15c. Vehicle insurance. \$0.00 17c. Taxasulment or lease payments: 17c. Car p	6b. Water, sewer, garbage collection	on	6b.	\$0.00
7. Food and housekeeping supplies 7. \$490.00 8. Childcare and childcare's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services 10. \$100.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$315.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a \$0.00 15b. Insurance deducted from your pay or included in lines 4 or 20. 15a \$0.00 15c. Vehicle insurance deducted from your pay or included in lines 4 or 20. 15a \$0.00 15c. Vehicle insurance. 15a \$0.00 15c. Vehicle insurance. 15a \$0.00 15c. Vehicle insurance. 15a \$0.00 15c. Vehicle insurance. Specify: 15a	6c. Telephone, cell phone, Interne	t, satellite, and cable services	6c.	\$300.00
8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$100.00 10. Personal care products and services 11. \$0.00 11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15d. Other insurance. Specify: 15d. Too to include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not include taxes deducted from your pay or included in lines 4 or 20. 15d. Taxes to not included in lines 4 or 20. 15d. Taxes to not include included in lines 4 or 20. 15d. Taxes to not include included in lines 4 or 20. 15d. Taxes to not include included in lines 4 or 20. 15d. Taxes to not include included in lines 4 or 20. 15d. Taxes to not include included in lines 4 or 20. 15d. Taxes to not include included in lines 4 or 20. 15d. Taxes to not include included included inc	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning 9, \$100.00 10. Personal care products and services 10. \$100.00 11. Medical and dental expenses 11. \$0.00 12. Transportation, Include gas, maintenance, bus or train fare. 12. \$315.00 Do not include car payments 13. \$0.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a \$0.00 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15a \$0.00 15c. Vehicle insurance 15b \$0.00 15c. Vehicle insurance 15c \$0.00 15c. Vehicle insurance. Specify	7. Food and housekeeping supplies	s	7.	\$490.00
10, Personal care products and services 10, \$100.00 11, Medical and dental expenses 11, \$0.00 12, Transportation, Include gas, maintenance, bus or train fare.	8. Childcare and children's educat	ion costs	8.	\$0.00
11. Medical and dental expenses 11. \$0.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$315.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15a. \$0.00	9. Clothing, laundry, and dry clean	ing	9.	\$100.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$315.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance.	10. Personal care products and se	rvices	10.	\$100.00
Do not include car payments 13. 13. 13. 13. 13. 13. 14.	11. Medical and dental expenses		11.	\$0.00
14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 00 not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Life insurance 15b \$0.00		intenance, bus or train fare.	12.	\$315.00
15. Insurance.	13. Entertainment, clubs, recreation	on, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15c \$50.00 15c. Vehicle insurance 15c \$50.00 15d. Other insurance. Specify: 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.	14. Charitable contributions and re	eligious donations	14.	\$0.00
15b		d from your pay or included in lines 4 or 20.		
15c. Vehicle insurance	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
Specify:			15c	\$50.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.	16. Taxes. Do not include taxes dedu	cted from your pay or included in lines 4 or 20.		
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. Other. Specify: 17d. S0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses.	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease payments:			
17c. Other. Specify:	17a. Car payments for Vehicle 1		17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehicle 2		17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I). 19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20c. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			17d	\$0.00
19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				\$0.00
Specify:		·	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	, , ,	ipport others who do not live with you.	10	\$0.00
20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		ot included in lines 4 or 5 of this form or on Schedule I: Your Income	19.	
20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00				
20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	20c. Property, homeowner's, or re	enter's insurance		
	20d. Maintenance, repair, and upk	reep expenses.		
	20e. Homeowner's association or	condominium dues	20e	\$0.00

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 35 of 67

Debtor 1 S		N	Benson	Case number (if known)		
Fi	irst Name	Middle Name	Last Name			
21. Other.	Specify:				21	\$0.00
	ate your monthly expense	S.				\$2,520.00
	ld lines 4 through 21.			\$0.00		
	opy line 22 (monthly expens	,,				\$2,520.00
22c. Ad	ld line 22a and 22b. The res	ult is your monthly exp	enses.		22.	
23.Calcula	ate your monthly net incor	ne.				
23a. Co	ppy line 12 (your combined r	monthly income) from	Schedule I.		23a	\$2,442.69
23b. Cc	opy your monthly expenses	from line 22 above.			23b	\$2,520.00
	btract your monthly expense		ncome.			(\$77.31)
Th	ne result is your monthly net	income.			23c	

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 36 of 67

Fill in this information to identify your case:					
Debtor 1	Shamika	N	Benson		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois (State)		
Case number (If known)			(,		

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below	
	Did you pay or agree to pay someone who is NOT an attorney to h	help you fill out bankruptcy forms?
	✓ No	
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and
×	/s/ Shamika Benson	×
	Signature of Debtor 1	Signature of Debtor 2
	Date 1/23/2017	Date
	MM/DD/YYYY	MM/DD/YYYY

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 37 of 67

Debtor 1	Shamika	N	Benson			
Debtor 2	First Name	Middle Nam	ne Last Nam	е		
(Spouse, if filing)	First Name	Middle Nam	ne Last Nam	e		
Jnited States	Bankruptcy Court for the	e: Northern	District of Illino (State			
Case number	r		(Stati			
	107					Check if this is
Jfficial	Form 107					amended filing
Statem	ent of Financi	al Affairs for	Individuals	Filing for Bankr	uptcy	12
				together, both are equally . On the top of any addit		
	nown). Answer every	•			, i () ()	•
Part 1: Giv	ve Details About You	r Marital Status an	d Where You Lived	Before		
1. What i	is your current marital s	status?				
ПМ	larried					
	larried ot married					
V N	ot married	vou lived anvwhere ot	ther than where you liv	ve now?		
2. During	ot married	you lived anywhere ot	ther than where you liv	ve now?		
2. During	ot married		-			
2. During	ot married g the last 3 years, have y		-			
2. During	ot married g the last 3 years, have y	you lived in the last 3 y	years. Do not include v Dates Debtor 1 lived			Dates Debtor 2 lived
2. During	ot married the last 3 years, have you o es. List all of the places	you lived in the last 3 y	years. Do not include v	where you live now.		Dates Debtor 2 lived there
2. During	ot married the last 3 years, have you o es. List all of the places	you lived in the last 3 y	years. Do not include v Dates Debtor 1 lived	where you live now.		
2. During N Y 18	ot married g the last 3 years, have go es. List all of the places gebtor 1:	you lived in the last 3 y	years. Do not include v Dates Debtor 1 lived here	where you live now. Debtor 2: Same as Debtor 1		there
2. During N Y 18	ot married g the last 3 years, have go es. List all of the places gebtor 1:	you lived in the last 3 y	years. Do not include v Dates Debtor 1 lived	where you live now. Debtor 2:		there Same as Debtor 1
2. During No. Y Ye	ot married g the last 3 years, have go es. List all of the places gebtor 1: 850 S Karlov Ave umber Street hicago Illinois	you lived in the last 3 y	years. Do not include v Dates Debtor 1 lived here	where you live now. Debtor 2: Same as Debtor 1		there Same as Debtor 1 From
2. During No. Y Ye 18 No.	ot married g the last 3 years, have go es. List all of the places gebtor 1: 850 S Karlov Ave umber Street	you lived in the last 3 y	years. Do not include v Dates Debtor 1 lived here	Debtor 2: Same as Debtor 1 Number Street City State	Zip Code	there Same as Debtor 1 From To
2. During No. Y Ye 18 No.	ot married g the last 3 years, have go es. List all of the places gebtor 1: 850 S Karlov Ave umber Street hicago Illinois	you lived in the last 3 y	years. Do not include v Dates Debtor 1 lived here	where you live now. Debtor 2: Same as Debtor 1 Number Street	Zip Code	there Same as Debtor 1 From
2. During N Y D 18 N Ci Ci	ot married g the last 3 years, have go es. List all of the places gebtor 1: 850 S Karlov Ave umber Street hicago Illinois	you lived in the last 3 y t t 60623 Zip Code	years. Do not include v Dates Debtor 1 lived here	Debtor 2: Same as Debtor 1 Number Street City State	Zip Code	there Same as Debtor 1 From To
2. During N Y D 18 N Ci Ci	ot married g the last 3 years, have you ones. List all of the places ye ebtor 1: 850 S Karlov Ave umber Street hicago Illinois ity State	you lived in the last 3 y ti 60623 Zip Code	years. Do not include v Dates Debtor 1 lived here From 1/2012 To 12/2014	where you live now. Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1
2. During No. Y Ye Di 18 No. Ci Ci	ot married g the last 3 years, have you ones. List all of the places ye ebtor 1: 850 S Karlov Ave umber Street hicago Illinois ity State	you lived in the last 3 y ti 60623 Zip Code	years. Do not include v Dates Debtor 1 lived here From 1/2012 To 12/2014	where you live now. Debtor 2: Same as Debtor 1 Number Street City State Same as Debtor 1	Zip Code	there Same as Debtor 1 From To Same as Debtor 1 From

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Page 38 of 67 Document

Benson

Debtor 1 Shamika Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$2054.77 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, \$25398.32 Wages, For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$27111.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 39 of 67

Benson Debtor 1 Shamika __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment

City

State

Zip Code

Suppliers or vendors
Other

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 40 of 67

Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? risides include your ratiolises, any general partners, insiders included your ratio with you are a general partner, insiders included your ratio within you are an office, director, person in control, or owner of 20% or more of their voting securities, and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Dates of payment Total amount pay is all owe Dates of payment will owe Insider's Name Number Street Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider. No Yes. List all payments that benefited an insider. Dates of payment amount paid will owe Dates of payment amount payment amount payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment payment amount payd amount payment for this payment insider's Name Number Street City State Zip Code	or 1	Shamika		N		enson	Case number	(if known)
insider's Name Number Street City State Zip Code Insider's Name Number Street No Yes. List all payments that benefited an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payments on debts guaranteed or cosigned by an insider. Dates of payment paid amount paid amount payments or transfer any property on account of a debt that benefited an insider or payment paid amount paid amount paid amount payment still owe linear payment incider or payment paid amount payment still owe linear payment incider or payment payment paid amount payment incider or payment payment payment paid amount payment incider or payment payment payment incider or payment pa		First Name		Middle Name	Las	st Name		
Yes. List all payments to an insider. Dates of payment Total amount pount of this payment	nsi orp ge	ders include your porations of whic nt, including one	relatives; and the relatives; ar	any general partner an officer, director, ness you operate a	s; relatives of any person in control,	general partners; par , or owner of 20% or	tnerships of which y more of their voting	ou are a general partner; g securities; and any managing
Insider's Name Number Street City State Zip Code Insider's Name Number Street Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? No Yes. List all payments that benefited an insider. Dates of payment Dates of payment Dates of payment Insider's Name Number Street City State Zip Code Reason for this payment Reason for this payment Reason for this payment Include creditor's name Number Street City State Zip Code	✓			::-				
Number Street City State Zip Code	Ш	res. List all pa	yments to a	an insider.				Reason for this payment
City State Zip Code Insider's Name Number Street		Insider's Name						
Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? nclude payments on debts guaranteed or cosigned by an insider. ✓ No ✓ Yes. List all payments that benefited an insider. Dates of payment Dates of payment Paid Total amount you still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street		Number Street						
Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Insider's Name Number Street City State Zip Code Insider's Name Number Street		City	State	Zip Code				
City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Still owe Reason for this payment include creditor's name Insider's Name Number Street City State Zip Code		Insider's Name				· -		
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Total amount pou still owe Insider's Name Number Street City State Zip Code Insider's Name Number Street		Number Street						
Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments that benefited an insider. Dates of payment paid Total amount you still owe Include creditor's name City State Zip Code Insider's Name Number Street		City	State	Zin Code				
Insider's Name Number Street City State Zip Code Insider's Name Number Street		ude payments on No		-	sider. Dates of		-	Reason for this payment
Number Street City State Zip Code Insider's Name Number Street								Include creditor's name
City State Zip Code Insider's Name Number Street		Insider's Name						
Insider's Name Number Street		Number Street						
Number Street	_	City	State	Zip Code				
		Insider's Name				<u> </u>		
City State Zin Code		Number Street						
		City	State	Zip Code				

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 41 of 67

Debtor 1 Shamika Benson Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No **V** Yes. Fill in the details. Status of the case Nature of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed.

City

State

Zip Code

Property was garnished.

Property was attached, seized, or levied.

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 42 of 67

Debt	tor 1 Shamika	N	Benson	Case number (if known)	
	First Name	Middle Name	Last Name		
11.		you filed for bankruptcy, dic make a payment because yo		eank or financial institution, set off any am	ounts from your
	✓ No ✓ Yes. Fill in the det	ails.			
	_		Describe the action th	e creditor took Date action was taken	Amount
	Creditor's Name				-
	Number Street				
			Last 4 digits of account	number: XXXX-	
10	City	State Zip Code			f avaditava a accert
12.		custodian, or another officia		possession of an assignee for the benefit o	r creditors, a court-
	✓ No ☐ Yes				
Part	5: List Certain Gift	s and Contributions			
13.	Within 2 years before	you filed for bankruptcy, did	I you give any gifts with a t	otal value of more than \$600 per person?	
	✓ No Yes. Fill in the de	tails for each gift.			
	Gifts with a total per person	value of more than \$600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom Y	ou Gave the Gift	- -		
	Number Street				
	City Person's relationsh	State Zip Code	-		
		<u> </u>			
	Person to Whom Y	ou Gave the Gift	-		-
	Number Street		-		
	City	State Zip Code	-		
	Person's relationsh	ip to you			

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 43 of 67

Debt	or 1	Shamika	N	Benson	Case number (if known)		
		First Name	Middle Name	Last Name			
14.	Wit	hin 2 years before you filed fo	or hankruntev, did ve	ou give any gifts or contri	butions with a total value of n	nore than \$600	to any charity?
17.			or bankruptcy, did yo	ou give any gints of contri	buttons with a total value of h	iore than 4000	to any charity:
	⊻	No					
		Yes. Fill in the details for eac	h gift or contribution				
		Gifts or contributions to cha	arities	Describe what you con	tributed	Date you	Value
		that total more than \$600				contributed	
		Charity's Name					
		Number Street					
		Number Street					
		City State	Zip Code				
Part	6:	List Certain Losses					
15.		hin 1 year before you filed for nbling?	bankruptcy or since	e you filed for bankruptcy	, did you lose anything becau	se of theft, fire,	other disaster, or
	yan	-					
	✓	No					
		Yes. Fill in the details.					
		Describe the property you lo	st and	Describe any insuranc	e coverage for the loss	Date of your	Value of property
		how the loss occurred			insurance has paid. List	loss	lost
				pending insurance claim A/B: Property.	s on line 33 of Schedule		
				A.B. Troperty.			
Part	7.	List Certain Payments or	Transfore				
	Incl	ude any attorneys, bankruptcy p No Yes. Fill in the details.	petition preparers, or c	redit counseling agencies f	or services required in your bank	Date payment	Amount of
				transferred	or any property	or transfer was made	payment
		=					
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
			· 				
		Email or website address					
		Person Who Made the Paymer	nt. if Not You				
		i diddii iiid iiidad alid i ayiiid.	,				
		Person Who Was Paid					
		Number Street					
		-					
		City State	Zip Code				
		Email or website address					
		=aii oi wobolto addiess					
		Person Who Made the Paymer	nt, if Not You				

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 44 of 67

Debto	r 1 Sha		N	Benson	Case number (if known)		
	First	st Name	Middle Name	Last Name			
	nelp yo	1 year before you filed for ou deal with your creditors include any payment or tran	or to make payme		our behalf pay or transfer	any property to a	nyone who promised to
	✓ No Ye	o es. Fill in the details.					
				Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
	Pe	erson Who Was Paid					
	Nu	umber Street					
	Cit	ty State	Zip Code				
† 	the ord nclude and tran	dinary course of your busing both outright transfers and insfers that you have already	ess or financial affa transfers made as se	curity (such as the granting of			
'	_ .~			Description and value of property transferred		/ property or ceived or debts pa	Date transfer was made
	Pe	erson Who Received Transfer	r				
	Nu	umber Street					
	Cit Pe	ty State erson's relationship to you	Zip Code				
	Pe	erson Who Received Transfer	r				
	Nu	umber Street					
	Cit Pe	ty State erson's relationship to you	Zip Code				
	penefic	ciary? are often called asset-protec		you transfer any property to	a self-settled trust or sim	ilar device of whic	th you are a
I	Ye	es. Fill in the details.		Description and value of	the property transferred		Date transfer was made
	Na	ame of trust					

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 45 of 67

Benson Debtor 1 Shamika Case number (if known) Middle Name First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was number instrument before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 46 of 67

Benson Debtor 1 Shamika _ Case number (if known) Middle Name Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code City State Zip Code Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 47 of 67

Debt		Shamika		N	Benson	Case num	ber (if known)	
		First Name		Middle Name	Last Name			
26.	Hav	e you been a party	y in any judic	ial or administ	rative proceeding under	r any environmental la	w? Include settlements and orde	rs.
	Ħ	Yes. Fill in the det	tails.					
	Ч				Court or agency	Na	ture of the case	Status of the case
		Case title						Pending
					Court Name			On appeal
		Case number			Number Street			Concluded
		la. a			City State	Zip Code		_
					onnections to Any Bu			
27.	Witl	nin 4 years before	you filed for	bankruptcy, di	d you own a business or	have any of the follow	ving connections to any business?	?
		A member of A partner in a	f a limited liab a partnership	oility company (rade, profession, or othe LLC) or limited liability particles of a corporation		e or part-time	
		An owner of	at least 5% c	f the voting or	equity securities of a cor	poration		
		_				p		
	✓	No. None of the a						
		Yes. Check all that	at apply abo	e and fill in the	e details below for each l	business.		
					Describe the nat	ure of the business	Employer Identification no include Social Security no	
		Business Name					EIN:	
		Number Street			Name of account	ant or bookkeeper	Dates business existed	
		City	State	Zip Code	—	ant of bookkeeper	From To	
					Describe the nat	ure of the business	Employer Identification nu include Social Security nu	
		Business Name			_		EIN:	
		Number Street			Name of account	ant or bookkeeper	Dates business existed	
		City	State	Zip Code		ant or bookkeeper	F	
		Oily	otato	Zip code			From To	
					Describe the nat	ure of the business	Employer Identification nu include Social Security nu	
		Business Name			_		EIN:	
		Number Street			Name of account	ant or bookkeeper	Dates business existed	
		City	State	Zip Code			From To	

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 48 of 67

Deb	otor 1 Shamika	N	Benson	Case number (if known)
	First Name	Middle Name	Last Name	
28.	Within 2 years before you filed creditors, or other parties.	for bankruptcy, did y	ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
	No Yes. Fill in the details below	w.		
	_		Date issued	
	Name		MM/DD/YYYY	
	Number Street		<u> </u>	
	City State	Zip Code	_	
Pari	t 12: Sign Below			
		fines up to \$250,000,	,	ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of De			Signature of Debtor 2
	Date 1/23/201	7		Date
ı	Did you attach additional pages	to Your Statement o	f Financial Affairs for Indivic	luals Filing for Bankruptcy (Official Form 107)?
	✓ No Yes			
ı	Did you pay or agree to pay som	neone who is not an a	ttorney to help you fill out b	ankruptcy forms?
	✓ No			
	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 49 of 67

Fill in this information to identify your case:				
Debtor 1	Shamika	N	Benson	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filing)	First Name	Middle Name	Last Name	,
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	
Case number (If known)			(State)	

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral Did you claim the property What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: CREDIT ACCEPTANCE Retain the property and redeem it. Yes Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Dodge Avenger | Value: \$4,825.00 Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 50 of 67

	Shamika	N	Benson	Case number (i	<i>if</i>
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpired Person	onal Property Leases			
informa		ate leases. Unexpired le	ases are leases that	t are still in effect; the lea	ed Leases (Official Form 106G), fill in the ase period has not yet ended. You may
Des	scribe your unexpired personal	property leases			Will the lease be assumed?
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				_
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				No Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				_
Part 3:	Sign Below				
Unde			intention about any	property of my estate th	nat secures a debt and any personal
_	/s/ Shamika Benson		*_		
Si	gnature of Debtor 1		Si	gnature of Debtor 1	
D	ate 1/23/2017		Da	ate	
	MM/DD/YYYY			MM/DD/YYYY	

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 51 of 67

B 203 (12/94)

In

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Shamika N Benson	Case No.	
_	Debtor	_	(If known)
		Chapter	Chapter 7
1.	DISCLOSURE OF COMPEN Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 20	116(b), I certify that I am the attorney for the	abovenamed debtor(s) and that
	compensation paid to me within one year before the rendered or to be rendered on behalf of the debtor(s)		
	For legal services, I have agreed to accept		\$1,430.00
	Prior to the filing of this statement I have received		\$0.00
	Balance Due		\$1,430.00
2.	The source of the compensation paid to me was:		
	Debtor Ot	her (specify)	
3.	The source of the compensation paid to me is:		
	Debtor Ot	her (specify)	
4.	I have not agreed to share the above-disclosed of members and associates of my law firm.	compensation with any other person unless	they are
	I have agreed to share the above-disclosed comp members or associates of my law firm. A copy of the people sharing in the compensation, is attack	the agreement, together with a list of the na	
5.	In return for the above-disclosed fee, I have agreed to a. Analysis of the debtor's financial situation, are bankruptcy;		
	b. Preparation and filing of any petition, schedu	les, statements of affairs and plan which ma	ay be required;
	c. Representation of the debtor at the meeting of	of creditors and confirmation hearing, and a	ny adjourned hearings thereof;
6.	By agreement with the debtor(s), the above-disclosed	d fee does not include the following services	3:
		CERTIFICATION	
	certify that the foregoing is a complete statement of a or(s) in this bankruptcy proceedings.	ny agreement or arrangement for payment t	to me for representation of the
	1/23/2017	/s/ Mike Miller	
	Date	Signature of Attorney	
		Semrad Law Firm	
		Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

		filing fee administrative fee
+	· ·	
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to:
http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit
20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 56 of 67

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Benson, Shamika N	Case No	
	Debtor(s)	0430 110.	
		Chapter.	Chapter7
	VERIFICA	ATION OF CREDITOR MAT	TRIX
TI knowledge	he above named Debtors hereby verify t e.	nat the attached list of creditors is tr	rue and correct to the best of their
Date:	1/23/2017	/s/ Benson, Shan Benson, Shamik Signature of Deb	sa N

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 57 of 67

CREDIT ACCEPTANCE PO BOX 513 Southfield, MI, 48037

CCI 501 Greene Street # 302 Augusta, GA, 30901

Comed Po Box 805379 Chicago, IL, 60680

I C SYSTEM INC PO BOX 64378 SAINT PAUL, MN, 55164

Comcast p.o. box 196 Newark, NJ, 07101

CREDITORS DISCOUNT & A 415 E MAIN ST STREATOR, IL, 61364

STELLAR RECOVERY INC 1327 HWY 2 W KALISPELL, MT, 59901

Dish Network 9601 S Meridian Blvd Englewood, CO, 80112

Loretto Hospital 645 S. Central Avenue Chicago, IL, 60644

Peoples Gas 200 E. Randolph Chicago, IL, 60601

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 58 of 67

HARRIS & HARRIS LTD 222 Merchandise Mart Plaza, Suite 1900 Chicago, IL, 60654

Speedy Cash Po Box 101928 Birmingham, AL, 35210

Americas Financial Chocie 10302 S Halsted St Chicago, IL, 60628 B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

		Northern District of	Illinois	
n re_	Shamika N Benson		Case No.	
	Debtor		Chapter	(If known) Chapter 7
	DISCLOSURE OF C	OMPENSATION C	F ATTORNEY F	OR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one y rendered or to be rendered on behalf o	ear before the filing of the petitio	n in bankruptev, or agreed to	he paid to me for services
	For legal services, I have agreed to acco	ept		\$1,430.00
	Prior to the filing of this statement I ha	ave received		\$0.00
	Balance Due			\$1,430.00
2.	The source of the compensation paid t	o me was:		
	Z Debtor	Other (specify)		
3.	The source of the compensation paid t	o me is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the above members and associates of my law	ve-disclosed compensation with virm.	any other person unless the	y are
	I have agreed to share the above-d members or associates of my law f the people sharing in the compens	firm. A copy of the agreement, tog	her person or persons who a gether with a list of the name	ere not as of
5.	In return for the above-disclosed fee, I a. Analysis of the debtor's financi- bankruptcy;	have agreed to render legal servical situation, and rendering advice	ce for all aspects of the bank to the debtor in determining	ruptcy case, including: g whether to file a petition in
	b. Preparation and filing of any pe	stition, schedules, statements of a	affairs and plan which may b	e required;
	c. Representation of the debtor at	the meeting of creditors and cor	ifirmation hearing, and any a	djourned hearings thereof;
6.	By agreement with the debtor(s), the ab	ove-disclosed fee does not inclu	de the following services:	
				
		CERTIFICATION		
l debto	certify that the foregoing is a complete : or(s) in this bankruptcy proceedings.	statement of any agreement or ar	rangement for payment to m	e for representation of the
	1/14/2017		/s/ Mike Miller	:
	Date		Signature of Attorney	
	_		Semrad Law Firm	PERMIT
	_		Name of law firm	



CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1430.00 attorney fees plus any necessary post-petition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr. Adding additional bills \$30.00 Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 bayable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

Initial:

Shamika N Benson

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 61 of 67

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Client Warring Peusen Client
Attorney

Initial:

Date: 1/14/2017

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 62 of 67

Debtor 1 Shamika	N	Benson	Case number (if known)	1		
Variable var	Middle Name estions for Reporting Purpos	Last Name Ses				
16. What kind of debts do you have?						
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	expenses are paid that No.	ter 7. Do you estimat		perty is excluded and administrative d creditors?		
18. How many creditors do you estimate that you owe?	1-49 50-99 100-199 200-999	5,001-	-5,000 -10,000 1-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	[] \$10,00 [] \$50,00	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
20. How much do you estimate your liabilities to be? Pari 7. Sign Below	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,00 \$50,00	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. ** /**/Shamika Benson* /** /** /** /** /** /** /**					
and the second of the second	***************************************	7 DD / YYYY TOWN STOTE AND	Executed on	MM / DD / YYYYY		

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 63 of 67

Fill in this info	rmation to identify you	r case:		
Debtor 1	Shamika	N	Benson	
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
United States I	Sankruptcy Court for th		District of Illinois	*
	owniaptoy count for at	o. Northern	(State)	
Case number (If known)		· · · · · · · · · · · · · · · · · · ·		
Official	Form 106D)ec	**************************************	Check if this is a amended filing
Declarat	ion About ar	n Individual Debto	r's Schedule	9S 12/1
If two married	people are filing toge	ther, both are equally respons	sible for supplying corre	ect information.
Part E Sign		meone who is NOT an attorney	y to help you fill out ba	nkruptcy forms?
Z No				
Yes.	Name of person		Attach Bankruptcy Signature (Official	y Petition Preparer's Notice, Declaration, and Form 119).
that they	are true and correct.	are that I have read the summ	v) <u>*</u>	d with this declaration and are of Debtor 2
Date 1/14	/2017 () /DD/YYYY		Date	MM/DD/YYY
1-11-1			1/	MANUTON I I I

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 64 of 67

Debtor 1	Shamika	N	Benson	Case number (if known)
	First Name	Middle Name	Last Name	
28. Wit cre	thin 2 years before you ditors, or other partie	a filed for bankruptcy, did y es.	ou give a financíal state	ment to anyone about your business? Include all financial institutions,
Z	No Yes. Fill in the details	below.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street			
	City	State Zip Code	·····	
Part 12:	Sign Below	J.		
true	and correct. I underst ikruptcy case can res	and that making a false sta	tement, concealing pro-	ments, and I declare under penalty of perjury that the answers are perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature	of Debtor		Signature of Debtor 2
	Date 1/14	1/29/7		Date
Did y	ou attach additional	Sages to Your Statement of	Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?
	40	** C		,
	es es			
Did y	ou pay or agree to pay	y someone who is not an at	torney to help you fill ou	t bankruptcy forms?
[] N	чo			
Parent \	es. Name of person			Attach the Bankruptcy Petition Preparer's Notice,

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 65 of 67

Debtor	Shamika	N	Benson	Case number	r (if
1	First Name	Middle Name	Last Name	known)	· · · · · · · · · · · · · · · · · · ·
Part 2:	List Your Unexpired Pers	onal Property Lease:	S	•	
morma	unexpired personal property tion below. Do not list real es an unexpired personal prope	tate leases. Unexpired I	eases are leases	that are still in effect; the	ired Leases (Official Form 106G), fill in the lease period has not yet ended. You may
Des	scribe your unexpired persona	l property leases			Will the lease be assumed?
Les	sor's name:				☐ No ☐ Yes
	cription of leased perty:				Enney 1 VVI
Les	sor's name:				No Yes
	cription of leased perty:				· l
Less	sor's name:				No Yes
	cription of leased perty:				Bassay E
Less	sor's name:		***************************************		No Yes
	cription of leased perty:				
Less	sor's name:				No Yes
	cription of leased erty:				
Less	or's name:				No Yes
Desc prop	cription of leased erty:				
Less	or's name:		***************************************		No Yes
Desc	oription of leased erty:				
Part 3:	Sign Below				e von Provincia and antiquation of the provincial of the second of the s
Under prope	penalty of perjury, I declare rty that is subject to an unexp	that I have indicated my bired lease.	intention about	any property of my estate t	hat secures a debt and any personal
	s/ Shamika Benson nature of Debtor 1	Me form	^ x	Signature of Debtor 1	
	te 1/14/2017 MM/DD/YYYY			Date MM/DD/YYYY	

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 66 of 67

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Benson, Shamika N	Case No
	Debtor(s)	Case No.
		Chapter Chapter7
	VERIF	ATION OF CREDITOR MATRIX
TI nowledge	he above named Debtors hereby ver e.	that the attached list of creditors is true and correct to the best of their
Date:	1/14/2017	/s/ Benson, Shamika W WWW DUW
		Benson, Shamika N Signature of Debtor
		Synattie of Besty

Case 17-01902 Doc 1 Filed 01/23/17 Entered 01/23/17 14:32:12 Desc Main Document Page 67 of 67

Debtor 1	Shamika First Name	N Middle Name	Benson	Case number	er (if known)		
	THIST INCOME	made Name	i.ast Name	Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
Do no	nployment compensation of enter the amount if you the Social Security Act.	u contend that the amount r	eceived was a benefit	\$0.00			
For y	our spouse		\$0.00 \$0.00				
9.Pensi benef	ion or retirement incomit under the Social Securi	ne. Do not include any amoi ty Act.	unt received that was a	\$0.00			
amou paym intern	int. Do not include any b ents received as a victim	ces not listed above. Specil enefits received under the Sc of a war crime, a crime agair ism. If necessary, list other s	ocial Security Act or				
Other	Government Assistance			\$490.00			
Total	amounts from separate p	pages, if any.		+\$0.00	, -	+	
each		nt monthly income. Add lin	_	\$2,539.60	+	***************************************	\$2,539.60
colu	umn. Then add the total	for Column A to the total for	Column B.			TANETH AND A SECOND AND A SECOND ASSESSMENT AND A SECOND ASSESSMENT ASSESSMEN	
Dani Or	Netermina Whatha	the Means Test Applie	a ta Vari				Total current monthly income
COLUMN TO SERVICE AND ADDRESS OF THE PERSON NAMED IN COLUMN TO SERVICE AND ADDRESS OF		thly income for the year.					
		onthly income from line 11.			Copy line	11 here →	\$2,539.60
1	Multiply by 12 (the numb	per of months in a year).					X 12
12b. 1	The result is your annual	income for this part of the fo	orm.			12b.	
13 Calcu	late the median family	income that applies to yo	u. Follow these steps:				l o
Fill in	the state in which you liv	e. ::	Illinois				
Filt in	the number of people in	your household.	1				
Fill in : house		e for your state and size of				13.	\$50,133.00
instruc	d a list of applicable med ctions for this form. This do the lines compare?	ian income amounts, go onl list may also be available at t	line using the link specified the bankruptcy clerk's offic	d in the separate ce.			h
	•	or equal to line 13. On the t	op of page 1, check box 1	i, There is no presumpt	ion of abu	se.	
14b. [n line 13. On the top of pagi jut Form 122A-2.	e 1, check box 2, The pres	sumption of abuse is de	etermined I	oy Form 122A-2.	
Part 3:	Sign Below	The state of the s					
By si	gning here, I declare und	er penalty of perjury that the	information on this staten	nent and in any attachm	ents is tru	e and correct.	
	/s/ Shamika Benson	MANNEY	SUV ×				
Si	gnature of Debtor 1		S S	ignature of Debtor 2		***************************************	
D	ate 1/14/2017 MM/DD/YYYY	<i>;</i>	D	nate 1/14/2017 MM/DD/YYYY			

If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.